STATE OF NEW HAMPSHIRE

2017 Statement of Income and ExpenseRECEIVED

for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE George Atanyson I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: (Name of partnership, firm or corporation) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: (Full Name of Client as it appears on the Lobbyist Registration Form) All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. July 26, 2017 April 26, 2017 IV. Date of Report activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17 Reports cover: October 25, 2017 January 31, 2018 activity from 10/1/17 to 12/31/17 activity from 7/1/17 to 9/30/17 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B—Report of Honorariums or **Expense Reimbursement** If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. 7/2e/17 (Date) (Signature of lobbyist)

George Afanasa

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

| | George Ala | | | |
|--|---|--|---|--|
| II. Name of lobbyist's partnership, firm or corporation, if any: | | | | |
| (Name of p | artnership, firm or corporation) | | | |
| | | | / / | |
| III. Name of Client | Julison + Johns | UN | Date | |
| Political Contributions For each political contributions client/lobbyist and lobby | oution that is reportable ing firm, indicate the fo | pursuant to RSA Chapt ollowing: | er 664 paid on behalf of the | |
| full name of candidate: | SUMUNU | Christopher | (Middle Name/Initial) | |
| | (Last Name) | (First Name) | (Middle Name/Initial) | |
| Amount of contribution \$ _ | 1.000.00 | Office Candidate is | Seeking <u>Governor</u> | |
| | | ove for amount of contribut | tion. If the actual cost is not kno | |
| enter an estimated value and | I the word "estimate." | | tion. If the actual cost is not known | |
| Full name of candidate: | Senate Me, (Last Name) | publican Majorit (First Name) | y PAC (Middle Name/Initial) Seeking fanty Comm. Hee | |
| Full name of candidate: Amount of contribution \$ | Senate Registrate." Senate Registrate (Last Name) Source ind contribution, provide ntribution on the line about the word "estimate." | Office Candidate is see a description of the goods ove for amount of contribut | (Middle Name/Initial) Seeking <u>farty Commercials</u> or services provided, and entertion. If the actual cost is not known. | |
| Full name of candidate: Amount of contribution \$ | Senate Registrate." Senate Registrate (Last Name) Source ind contribution, provide ntribution on the line about the word "estimate." | Office Candidate is so a description of the goods ove for amount of contribut Senale Denne (First Name) | (Middle Name/Initial) Seeking <u>farty Commercials</u> or services provided, and entertion. If the actual cost is not known. | |

| actual cost of the in-kind contribution on the line above for | scription of the goods or services provided, and enter the or amount of contribution. If the actual cost is not known, |
|--|--|
| enter an estimated value and the word "estimate." | , |
| | |
| | |
| | |
| If more than three contributions were made, report additional co | ontributions on separate addendum C forms.) |
| Sworn Statement/Affirmation by Lobbyist | |
| have read RSA 15, RSA 15-B and RSA 664 and he | rehy eveger or affirm that the foregoing information |
| is true and complete to the best of my knowledge and | d belief. |
| is true and complete to the best of my knowledge and | d belief. |
| is true and complete to the best of my knowledge and (Signature of lobbyist) | 1 belief. 7/26/17 (Date) |
| is true and complete to the best of my knowledge and | d belief. |